



Application Data Sheet

Application Information

Application number:: 10/791,373
Filing Date:: March 1, 2004
Application Type:: Continuation-in-Part
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?
Title:: Clamp Connection and Release Device
Attorney Docket Number:: 1131-102.US
Request for Early Publication?::
Request for Non-Publication?::
Suggested Drawing Figure:: 1
Total Drawing Sheets:: 7
Small Entity:: Yes
Petition included?::
Secrecy Order in Parent Appl.?::

Applicant Information

Applicant Authority type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Dennis
Middle Name::
Family Name:: Janovici
City of Residence:: Venice
State or Province of Residence:: California
Country of Residence:: US

Street of mailing address:: 1023 Pleasant View Avenue
City of mailing address:: Venice
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 90291

Applicant Authority type:: Inventor
Primary Citizenship Country: US
Status:: Full Capacity
Given Name:: Anthony
Middle Name::
Family Name:: Zahn, Jr.
City of Residence:: Henderson
State or Province of Residence:: Nevada
Country of Residence:: US
Street of mailing address:: 1021 Gladiola Way
City of mailing address:: Henderson
State or Province of mailing address:: NV
Postal or Zip Code of mailing address:: 89015

Applicant Authority type:: Inventor
Primary Citizenship Country: US
Status:: Full Capacity
Given Name:: Robert
Middle Name::
Family Name:: White
City of Residence:: Henderson
State or Province of Residence:: NV
Country of Residence:: US
Street of mailing address:: 588 Kennerly Street
City of mailing address:: Henderson

State or Province of mailing address:: NV
Postal or Zip Code of mailing address:: 89015

Applicant Authority type:: Inventor
Primary Citizenship Country: US
Status:: Full Capacity
Given Name:: Matt
Middle Name::
Family Name:: Sweeney
City of Residence:: Studio City
State or Province of Residence:: California
Country of Residence:: US
Street of mailing address:: 11561 Kelsey Street
City of mailing address:: Studio City
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 91604

Correspondence Information

Name:: Colin P. Abrahams
Street of mailing address:: 5850 Canoga Avenue, Suite 400
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Representative Information

Representative Designation::	Registration number::	Name::
Primary	32393	Colin P. Abrahams

Representative Customer Number::	023390
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Domestic Priority Information

Application::	Continuity Type:	Parent Application::	Parent Filing Date::
This Application	continuation in part	09/894,930	06/28/01

Foreign Priority Information

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Assignment Information

Assignee name::